Supplement Expenditure (Government Code Se		Type or print in ink. Amounts may be rounded to whole dollars.			eriod 2013	CITY SUP Date Stamp		CALIFORNIA 465		.65	
SEE INSTRUCTIONS O	ON REVERSE	☐ Amendment (Explain Belo	Below)	through03/16/2				Page_ 1 of4			
				Date of election if ap (Month, Day, Ye	ar)			For Offici	al Use On	ly	
1. Committee	/Filer Information	I.D. NUMBER (If recipient committee) 1344093		Treasurer (IF	recipient con	nmittee)					
COMMITTEE/FILER	'S NAME			NAME OF TREASUR	ER						
NATIONAL ASSOCIATION OF REALTORS® FUND				KAREN PASCHAL							
STREET ADDRESS		_		MAILING ADDRESS 430 N. MICHI	GAN AVENU	E					
CITY	OTATE	ZIP CODE AREA CODE/PHO	NIE.	CITY		STATE	ZIP CODE	AREA	CODE/PH	HONE	
CITY STATE ZIP CODE AREA CODE/PHONE CHICAGO IL, 60611 (312) 329-8381			JNE	CHICAGO IL, 60611 (312) 329-8239							
OPTIONAL: FAX/E	-MAIL ADDRESS			OPTIONAL: FAX/E-	MAIL ADDRES	SS			-		
2. Name of Ca	andidate or Measure S	upported or Opposed							CHEC	K ONE	
NAME OF CANDIDA	TE			OFFICE SOUGHT OR HELD	AND DISTRI	ICT, IF APPLICABLE			SUPPORT	OPPOSE	
RICK BARNES				City Council Mem	ber CITY	Y OF GLENDALE			х		
NAME OF BALLOT	MEASURE			BALLOT NO./LETTER	JURISDICTIO	ON			SUPPORT	OPPOSE	
3. Independe	nt Expenditures Made	Attach additional information on appr	opriately	labeled continuation sheet	s.			CUMULATI			
DATE	NAME AND ADD	RESS OF PAYEE		DESCRIPTION OF EXPEN	NDITURE	AMO	UNT		AR YEAR DEC. 31		
	NATIONAL ASSOCIATION OF RE	ALTORS®	VECTAVIO			3,7	20.00				
03/11/2013	430 N. MICHIGAN AVENUE		VOTE	VOTER LISTS AND CONSULTING SERVICES		CES		51,670.00			
03/11/2013	CHICAGO, IL 60611										
	ASSOCIATED CAMPAIGN CONSUL	TING & ELECTION SERVICES, I	LC			3,7	20.00				
03/11/2013	1750 K STREET, NW, STE. 700 WASHINGTON, DC 20006		VOTER LISTS AND CONSULTING SERVICES			MEMO Subpayment made through: NATIONAL ASSOCIATION OF REALTORS®					
03/11/2013					NATION						
	Harveston-accountate and the Medical Con-										
	10000 National Control of the Contro	TING & ELECTION SERVICES, I		PHONE CALLS		5,5	00.00				
03/11/2013	1750 K STREET, NW, STE. 700								670.00		
	WASHINGTON, DC 20006										

## SUPPLEMENTAL INDEPENDENT EXPENDITURE

## Supplemental Independent **Expenditure Report**

SEE INSTRUCTIONS ON REVERSE

Type or print in ink. Amounts may be rounded to whole dollars.

Rej	oort covers period	CIPA COMERK					
from	01/01/2013	- 2013 MAR	15	PM	1: (		
through	03/16/2013	-					

CALIFORNIA FORM

For Official Use Only

For use by an officeholder, candidate, or committee making independent expenditures totaling \$1000 or

more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

04/02/2013

Date of election if applicable:

(Month, Day, Year)

V Independ	ent Expenditures Made Attach additional information	on appropriately labeled continuation sheets.  DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)
03/11/2013	FAIRMONT CONSULTING  18118 CHESTERFIELD AIRPORT RD. #1  CHESTERFIELD, MO 63005	TELEPHONE CALLS	5,000.00 MEMO Subpayment made ASSOCIATED CAMP CONSULTING & EL	AIGN
03/11/2013	ASSOCIATED CAMPAIGN CONSULTING & ELECTION SERVICES, 1750 K STREET, NW, STE. 700 WASHINGTON, DC 20006	LLGAILERS	32,450.00	51,670.00
03/11/2013	TARGETBLUE, LLC 1155 CONNECTICUT AVE., NW, #601 WASHINGTON, DC 20036	DESIGN	1,200.00 MEMO Subpayment made ASSOCIATED CAMP CONSULTING & EL	AIGN
03/11/2013	CSI 205 W. JEFFERSON ST. FALLS CHURCH, VA 22046	PRINTING	25,000.00 MEMO Subpayment made ASSOCIATED CAMP CONSULTING ELL SERVICES. LLC	AIGN
03/11/2013	U.S. POSTMASTER 800 W. BROAD ST., STE. 100 FALLS CHURCH, VA 22046	POSTAGE	6,250.00 MEMO Subpayment made ASSOCIATED CAMP CONSULTING & EL CERVICES, LLC	AIGN
03/11/2013	NATIONAL ASSOCIATION OF REALTORS® 430 N. MICHIGAN AVENUE CHICAGO, IL 60611	POLLING	10,000.00	51,670.00

Type or print in ink.
Amounts may be rounded to whole dollars.

from 01/01/2013 2013 MAR 15 PM 1: 06

FORM 465

SEE INSTRUCTIONS ON REVERSE

For use by an officeholder, candidate, or committee making independent expenditures totaling \$1000 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

Date of election if applicable: (Month, Day, Year)

through 03/16/2013

Report covers period

04/02/2013

For Official Use Only

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Page 3

/ Independ	lent Expenditures Made Attach additional info	prmation on appropriately labeled continuation sheets.  DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
03/11/2013	AMERICAN STRATEGIES, INC.  1750 K STREET, NW, STE. 700  WASHINGTON, DC 20006	POLLING	10,000.00 MEMO Subpayment made NATIONAL ASSOCI REALTORS®	through: ATION OF
		. H		

## Supplemental Independent Expenditure Report

Type or print in ink.
Amounts may be rounded

SUPPLEMENTAL	INDEPENDENT	EXPENDITURE
SUPPLEINENTAL	INDEFENDENT	EXPENDITURE

Expenditure Report		to whole dollars.		FORM 465		
SEE INSTRUCTIONS ON REVERSE			through03/16/2013	Page4 of4_		
NAME OF FILER NATIONAL ASSOCIATION OF REALTORS® FUNI	I.D. NUMBER (If recipient com.) 1344093					
4. Summary				51 (70 00		
<ol> <li>Total independent expenditures of \$1</li> </ol>	00 or more made this period. (Part 3.	)		\$		
2. Total independent expenditures unde	2. Total independent expenditures under \$100 made this period. (Not itemized.)					
3. Total independent expenditures made	AL \$					
5. Filing Officers Enter the name and a	address of each filing officer with whom the	he filer's most recent can	npaign statements (Form 450, 460 or	461) have been filed.		
1) NAME OF FILING OFFICER SECRETARY OF STATE		3) NAME OF FILIN	G OFFICER			
ADDRESS POLITICAL REFORM DIVISION 1500 11TH ST., ROOM 495	REET)	ADDRESS	(NO. AND STREET)			
CITY SACRAMENTO, CA 95814	STATE ZIP CODE	CITY	E	STATE ZIP CODE		
2) NAME OF FILING OFFICER		4) NAME OF FILIN	G OFFICER			
ADDRESS (NO. AND ST	REET)	ADDRESS	(NO. AND STREET)			
CITY	STATE ZIP CODE	СПҮ		STATE ZIP CODE		
6. Verification						
I certify that the "independent expenditure(s) as those terms are defined in Government C statement and to the best of my knowledge to the foregoing is true and correct.  Executed on	ode Section 82031 and FPPC Regulation	18225.7. I have used all red complete. Leertify under	easonable diligence in preparing and re	viewing this		
Executed onDATE	BySIGNATURE OF CONTR	COLLING OFFICEHOLDER, CANDIDA	ATE, STATE MEASURE PROPONENT, OR RESPONSIE	BLE OFFICER OF SPONSOR		
Executed onDATE	Bysid	GNATURE OF CONTROLLING OFF	ICEHOLDER, CANDIDATE, STATE MEASURE PROPO	DNENT		
Executed on	Ву	GNATURE OF CONTROLLING OFF	ICEHOLDER, CANDIDATE, STATE MEASURE PROPO	DNENT		